

PART B - FEE(S) TRANSMITTAL

4-1-5

Complete and send this form, together with applicable fee(s), to: Mail

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 P.O. Box 1450
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or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

28075 7590 02/28/2005

CROMPTON, SEAGER & TUFTE, LLC
 1221 NICOLLET AVENUE
 SUITE 800
 MINNEAPOLIS, MN 55403-2420

04/04/2005 HUONG2 00000037 10811289

01 FC:1504 300.00 OP
 02 FC:1501 1400.00 OP
 03 FC:8001 30.00 OP

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CERTIFICATE UNDER 37 C.F.R. 1.10:

I hereby certified that this Fee Transmittal is being deposited in the US Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV 314496852 US, in an envelope addressed to the USPTO on the date indicated below:

Kathleen L. Bookley	(Depositor's name)
<i>Kathleen L. Bookley</i>	(Signature)
March 31, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/811,289	03/25/2004	Satoshi Sugimoto	1018.1204101	2191

TITLE OF INVENTION: TWO-STEP SWITCH DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/31/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
FRIEDHOFFER, MICHAEL A	2832	200-00100B

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kabushiki Kaisha Tokai Rika Denki Seisakusho

Aichi, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies ten (10)

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0413 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

David M. Crompton

Date

3/31/05

Typed or printed name David M. CromptonRegistration No. 36,772

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Satoshi Sugimoto et al. Confirmation No.: 2191
Serial No.: 10/811,289 Examiner: M. Friedhofer
Filing Date: March 25, 2004 Group Art Unit: 2832
Docket No.: 1018.1204101 Customer No.: 28075
For: TWO-STEP SWITCH DEVICE

TRANSMITTAL SHEET

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certified that this paper or papers, as described herein are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV 314496852 US, in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 31st day of March 2005.

By Kathleen L. Boekley
Kathleen L. Boekley

We are transmitting herewith the attached:

☐ Amendment
☐ No additional claim fee required ☐ The claim fee has been calculated as shown:

CLAIMS AS AMENDED							
				SMALL ENTITY		OTHER	
	REMAINING CLAIMS	HIGHEST PAID	EXTRA	RATE	ADD'L FEE	RATE	ADD'L FEE
TOTAL CLAIMS	-	=		X 25 =	\$	X 50 =	\$
INDEPENDENT CLAIMS	-	=		X 100 =	\$	X 200 =	\$
() FIRST MULTIPLE DEPENDENT CLAIM				+ 180 =	\$	+ 360 =	\$
TOTAL				\$		\$	

☐ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established.

[XX] A check in the amount of \$1,730.00 is enclosed. Itemization:
Fee Code 1501 \$1,400.00
Fee Code 1504 \$ 300.00
Fee Code 8001 \$ 30.00

[XX] Other: ISSUE FEE TRANSMITTAL.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to
Deposit Account No. 50-0413.

By: 
David M. Crompton, Reg. No. 36,772

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